

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Concerned American Voters			FEC IDENTIFICATION NUMBER ▼ C C00525899		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 07 / 24 / 2015</div> </div>					
Full Name of Payee Voter Contact Services, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2015		
Mailing Address 107 S. West St, PMB 501			Amount 27174.35		
City State Zip Code Alexandria VA 22314		Transaction ID : SE.5456			
Purpose of Expenditure Staffing and Services for Forty Field Canvassers		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 07 / 22 / 2015	
Name of Federal Candidate RAND PAUL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought 542423.21			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City State Zip Code		Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State:		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures..... ▶</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures ▶</p> <p>(c) TOTAL Independent Expenditures..... ▶</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">27174.35</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Edward King</i> <div style="border-bottom: 1px solid black; width: 100%;"></div>			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 08 / 07 / 2015</div> </div>		

[Electronically Filed]

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
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Form/Schedule: F24A

Transaction ID :

This Committee files this amendment to properly adjust the aggregate independent expenditure totals due to a prior adjustment to estimated expenditures.

Form/Schedule:

Transaction ID: